FEC

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. THE GOODYEAR TIRE & RUBBER COMPANY GOOD GOVERNMENT FUND (GOODYEAR GOOD GOVERNMENT FUND) 200 INNOVATION WAY ADDRESS (number and street) (Check if address is changed) AKRON 44316 ОН CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS craig_melnick@goodyear.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 03 2020 C00100131 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Melnick, Craig, S,, Type or Print Name of Treasurer Melnick, Craig, S,, [Electronically Filed] 06 17 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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|-----------------------------|---|---------------------------|
| | COMMITTEE Committee: | |
| (a) | This committee is a principal campaign committee. (Complete the candidate information below.) | |
| (b) | This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.) | plete the candidate |
| Name of Candidate | | |
| Candidate Party Affiliat | Office Sought: House Senate President | State |
| (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| Name of Candidate | | |
| Party Cor | | (Democratic, |
| (d) | | Republican, etc.) Party. |
| Political A | action Committee (PAC): | |
| (e) x | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor- | nnected organization is a |
| | Corporation Corporation w/o Capital Stock | Labor Organization |
| | Membership Organization Trade Association | Cooperative |
| | In addition, this committee is a Lobbyist/Registrant PAC. | |
| (f) | This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee) | egregated fund or party |
| | In addition, this committee is a Lobbyist/Registrant PAC. | |
| | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | |
| Joint Fund | draising Representative: | |
| (g) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate. | vo or more political |
| (h) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate. | o or more political |
| Com | nmittees Participating in Joint Fundraiser | |
| 1. | FEC ID number | |
| 2. | FEC ID number | |
| 3. | FEC ID number | |
| 4 | | |

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|---|--|-------------------------------------|
| Write or Type Committee Name | | Tage 🗸 |
| | RUBBER COMPANY GOOD GOVERNMENT FUND (GOODYEA | R GOOD GOVERNMENT FUND) |
| | Organization, Affiliated Committee, Joint Fundraising Representati | |
| • | | |
| THE GOODYEAR TIRE & RU | BBER COMPANY GOOD GOVERNMENT FUND (GOODYEAR G | GOOD GOVERNMENT FUND) |
| | | |
| Mailing Address | 200 INNOVATION WAY | |
| Mailing Address | | |
| | AKRON | 44316 |
| | | |
| | CITY STATE | ZIP CODE |
| Relationship: Connected | d Organization Affiliated Committee Joint Fundraising Represe | ntative Leadership PAC Sponsor |
| Custodian of Records: Idea books and records. | ntify by name, address (phone number optional) and position of the | e person in possession of committee |
| Melnick, C | Craig, S, , | |
| Full Name | 30125 Wedgewood Blvd. | |
| Mailing Address | | |
| | | |
| | Solon | 44139 |
| Title or Position | CITY STATE | ZIP CODE |
| Treasurer | | 330 796 4437 |
| Treasurer: List the name an any designated agent (e.g., a | d address (phone number optional) of the treasurer of the committ assistant treasurer). | ee; and the name and address of |
| Full Name Melnick, C | craig, S, , | |
| Mailing Address | 30125 Wedgewood Blvd. | |
| | | |
| | Solon | 44139 |
| Title or Position | CITY STATE | ZIP CODE |
| Treasurer | Telephone number | 330 796 4437 |

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|--|--------------------------------|-----------------|
| | | |
| Full Name of Designated Agent | <u> </u> | |
| Mailing Address | | |
| | | |
| | CITY STATE | ZIP CODE |
| Title or Position | | |
| Banks or Other safety deposit bo Name of Bank, I | | accounts, rents |
| Mailing Address | PNC Bank 1900 East 9th Street | <u> </u> |
| g | | |
| | Cleveland OH 44114 | |
| | CITY STATE | ZIP CODE |
| Name of Bank, I | Depository, etc. | |
| | | |
| Mailing Address | | |
| | | |
| | | |
| | | |

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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| (h). Joint Fundraisi | ing Participant. | | |
|--|--|----------------------------|---|
| 1. | | FEC ID number | С |
| 2 | | FEC ID number | С |
| 3. | | FEC ID number | С |
| 4. | | FEC ID number | С |
| | | - | |
| = | d Organization, Affiliated Committee, Joint Fu | | |
| COOPER TIRE 8 | & RUBBER COMPANY POLITICAL | ACTION COMMI | |
| | | | |
| Mailing Address | 701 LIMA AVENUE | | |
| | | | |
| | FINDLAY | OH | 45840 |
| Relationship: | CITY ▲ | STATE A | ZIP CODE ▲ |
| Connecto | | oint Fundraising Represent | Leadership PAC Spo |
| Connecto | ed Organization Affiliated Committee | | Leadership PAC Spo |
| Connecte Pesignated Agent: Identi | | | Leadership PAC Spo |
| Connecte Designated Agent: Identi Full Name | | | Leadership PAC Spo |
| Connecte Designated Agent: Identi Full Name | | | Leadership PAC Spo |
| Connecte Designated Agent: Identi Full Name | ify by name, address (phone number – optional | | Leadership PAC Spo |
| Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION | ify by name, address (phone number – optional | | |
| Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION | ify by name, address (phone number – optional | STATE A Telephone Number | ZIP CODE A |
| Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION | ify by name, address (phone number – optional CITY Ories: List all banks or other depositories in wh | STATE A Telephone Number | ZIP CODE A |
| Connected Agent: Identify Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposit bases or make the safety deposit boxes or make the safety deposit boxe | ify by name, address (phone number – optional CITY A CITY A ories: List all banks or other depositories in whaintains funds. | STATE A Telephone Number | ZIP CODE A |
| Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Depositional afety deposit boxes or make the proposition of Bank, Depository, etc. | ify by name, address (phone number – optional CITY A CITY A ories: List all banks or other depositories in whaintains funds. | STATE A Telephone Number | ZIP CODE A ts funds, holds accounts, rents |
| Connected Agent: Identify Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposit bases or make the safety deposit boxes or make the safety deposit boxe | ify by name, address (phone number – optional CITY A CITY A ories: List all banks or other depositories in whaintains funds. | STATE A Telephone Number | ZIP CODE A ts funds, holds accounts, rents |
| Connected Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Sanks or Other Depositional afety deposit boxes or make the proposition of Bank, Depository, etc. | ify by name, address (phone number – optional CITY A CITY A ories: List all banks or other depositories in whaintains funds. | STATE A Telephone Number | ZIP CODE A ts funds, holds accounts, rents |